

The Association Between Intimate Partner Violence and Functional Gastrointestinal Disorders and Symptoms Among Adult Women: A Systematic Review

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ABSTRACT

Functional gastrointestinal disorders (FGIDs) and symptoms have been identified as health consequences of intimate partner violence (IPV), with significant burdens for women.¹⁻²⁻³⁻⁴ However, whether specific types of abuse (i.e., psychological, physical and sexual) affect the health of women living with FGIDs in different ways, and the mechanisms that explain these impacts on their health and quality of life (QOL) outcomes, are not well understood.

PURPOSE

The purposes of this systematic review were: a) to examine the association between different types of IPV (i.e., physical, sexual, and psychological abuse) and the risk of FGIDs and symptoms (such as chronic abdominal pain symptoms, IBS, FD, frequent diarrhea, frequent constipation, and vomiting and nausea disorders) among adult women, b) to identify psychosocial and physiological factors that might mediate and/or moderate these health effects (i.e. mechanisms), and c) to identify how FGIDs and symptoms are associated women's QOL outcomes in the context of IPV.

RESEARCH QUESTIONS

- What is the relationship between various types of IPV and FGIDs and symptoms in adult women?
- What psychosocial and physiological factors might mediate and/or moderate the relationship between IPV and FGIDs and symptoms in adult women?
- What are the associations of FGIDs and symptoms and QOL outcomes among women who have experienced IPV?

METHODS

Using the PRISMA guideline, searches of selected electronic databases (PubMed, CINAHL, Cochrane Database of Systematic Reviews, ProQuest-Nursing & Allied Health, PsycINFO, Scopus, and Social Work Abstracts) were conducted for English language studies of adult women (15 years or older) who had experiencing IPV and reported FGIDs and symptoms. Both quantitative descriptive (i.e., ecological, cross-sectional, cohort, and case-control studies), and qualitative studies were included, with no time frame for publication specified. Quality assessment of each included study was completed using published guidelines adapted from Hoya for quantitative studies and the Critical Skills Appraisal Program (CASP) tool for qualitative studies.⁵⁻⁶

RESULTS

1444 unique records were initially identified. After Level 1 abstract screening by two reviewers, 1393 records were excluded, and 51 potentially relevant manuscripts remained. Level two full-text review yielded 15 included studies. Preliminary results suggest that there is an association between various types of IPV and FGIDs and symptoms, and some factors, such as stress, appear to mediate and/or moderate this association. The results of this study may help identify the types of practice interventions that could mitigate the consequences of IPV on the health of women living with FGIDs. The final results will be available by July 2020.

EXPECTED OUTCOMES

Based on the preliminary finding, there is an association between various types of IPV and FGIDs and symptoms, but no evidence regarding factors that either mediate or moderate this relationship. Also, there is an association between FGIDs and women's QOL outcomes in the context of IPV. This project intends to explore the evidence that links experiences of various types of IPV with FGIDs and symptoms among adult women and to identify priorities for future research and provide a foundation for improvements to clinical interventions.

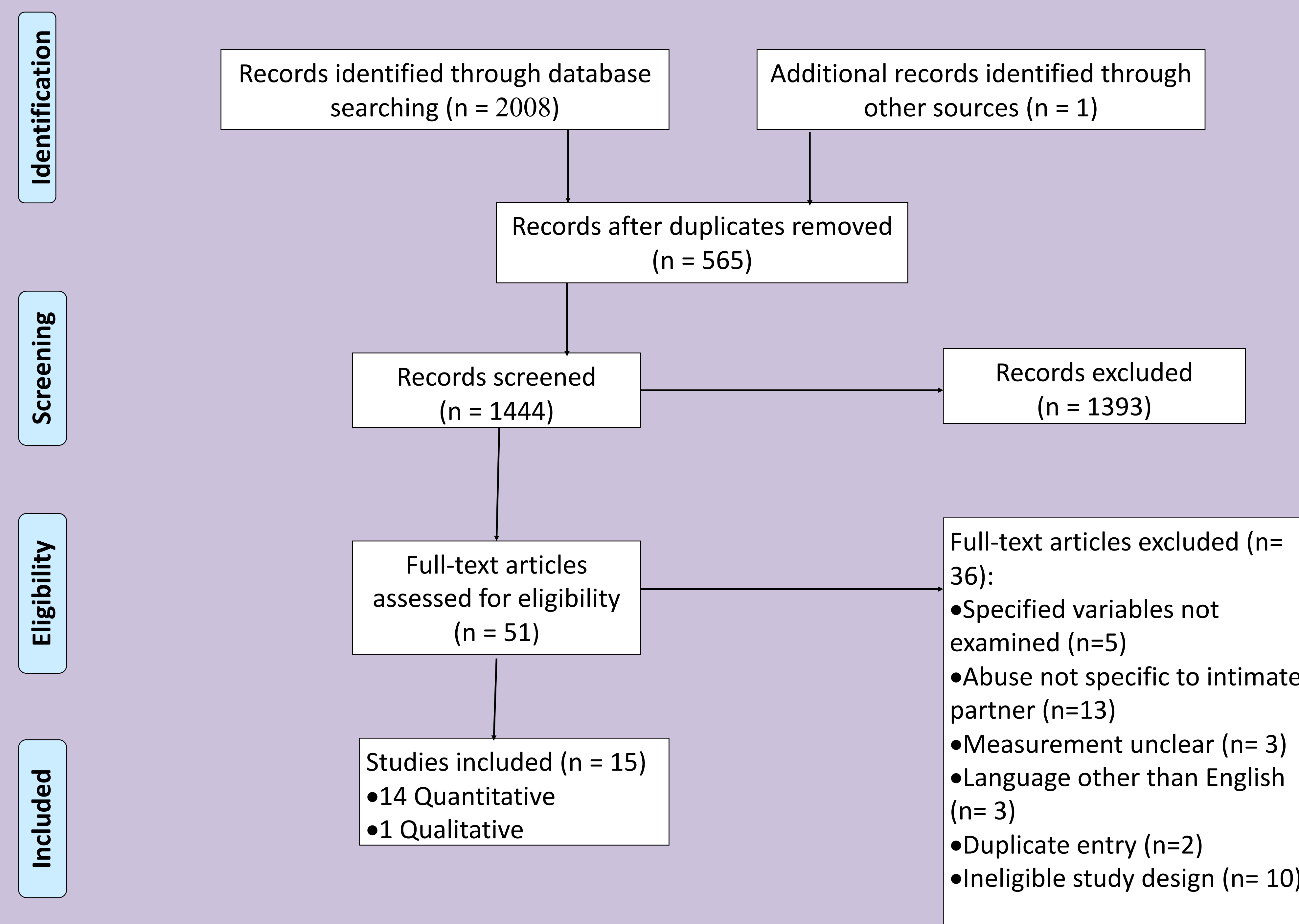


Figure 1. PRISMA 2009 Flow Diagram

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